

STD. 262 (REV. 7/2005)

CLAIMANT'S NAME

Cynthia Bryant

POSITION

Director

RESIDENCE ADDRESS*

SSN or EMPLOYEE NUMBER*

DEPARTMENT	
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Pages

Planning & Research

CBAD No.

DIVISION or BUREAU

INDEX NUMBER

Exempt

Governor's Office

352

HEADQUARTERS ADDRESS	
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TELEPHONE NUMBER

1400 Tenth Street

CITY

STATE

ZIP

CITY

STATE

ZIF

Sacramento

CA

95814

RECEIVED
JUN 10 2009
OFFICE OF PLANNING & RESEARCH
ADMINISTRATIVE SERVICES

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts/vouchers when required)		(12) NORMAL WORK HOURS	
3/12 Represented the State of California at the National Governor Association sponsored ARRA Implementation Conference in Washington, D.C.		(13) PRIVATE VEHICLE LICENSE NUMBER 4NMC786	
		(14) MILEAGE RATE CLAIMED 0.55	
Missing receipts for the following charges: Dinner on March 11th and cabfare from BWI to Downtown Washington, D.C. on March 11th.		AGENCY ACCOUNTING OFFICE USE ONLY PAID BY REVOLVING FUND CHECK NUMBER	
(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California. If a privately owned vehicle was used, and if mileage rates exceed the minimum rate, I certify that the cost of operating the vehicle was equal to or greater than the rate claimed, and that I have met the requirements as prescribed by SAM Sections 0750, 0751, 0752, 0753 and 0754 pertaining to vehicle safety and seat belt usage.			
CLAIMANT'S SIGNATURE [Redacted]	DATE 6-10-09	(16) SIGNATURE [Redacted]	DATE 6-10-09
(17) [Redacted] and TITLE (See Item 17 on reverse)		DATE	